



AIR FORCE ASSOCIATION

CAP Aerospace Educator Grant Application



DIRECTIONS: Please type or print the following information:

TEACHER/SCHOOL INFORMATION				
AEM # _____				
Last Name	First Name	Middle Initial	E-mail Address	
School Address	City	State	Zip Code	Telephone Number
THE PURPOSE OR OBJECTIVE OF THE GRANT				
How will the grant money be used? (Continue on separate sheet if necessary)				
How will this help promote aerospace education in your classroom? (Continue on separate sheet if necessary)				
Requested Funds (May receive up to \$250.00)		Grade level and number of students who will benefit from the grant		
If the funds will be used to visit an outside organization, please list the name, address, telephone number, and contact person of the organization. (This only applies if you use the funds outside of the school, for example, to support a field trip to a museum, airport, Air Force Base, etc.)				
Contact Person		Telephone Number		
Street Address		City	State	Zip Code
VERIFICATION				
Signature of Principal		Printed Name of Principal		
Signature of Educator		Date		
MAIL OR FAX DOCUMENTS TO:				
HQ CAP/ED 105 South Hansell Street/ Building 714 Maxwell Air Force Base, Alabama 36112-6332		QUESTIONS? Telephone: 334-953-7572 Fax: 334-953-4235 E-mail: jmontgomery@cap.gov		
Application for: <input type="checkbox"/> Fall - Due 30 September <input type="checkbox"/> Spring - Due 31 March				